



Alcohol and Gaming Commission of Ontario
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Toronto ON M2N 0A4
Tel.: 416-326-8700
Toll free in Ontario: 1-800-522-2876
Inquiries: www.agco.ca/iagco • Website: www.agco.ca

Authorization of Attending Veterinarian (EIPH Program)

Submission Information

Submitted By	
Submission Name	File Number

I, _____, AGCO Licence No. _____,
(Name of Attending Veterinarian) (Licence no.)

on _____
(date)

- ☐ Observed
☐ Endoscoped
☐ Consulted with the Owner/Trainer regarding

the following horse:

Horse Name	Tattoo or Microchip

☐ To Place Horse on EIPH Program

In my professional opinion, the horse mentioned in this application has bled into its upper respiratory system and I therefore prescribe the use of Furosemide to control or reduce the amount of haemorrhage.

☐ To Remove Horse from EIPH Program

It is my professional opinion that the horse mentioned in this application can be removed from the EIPH Program.

Declaration

By signing this document, I solemnly declare that I have read over this document and I make this solemn declaration conscientiously, believing its contents to be true. I understand that further questions may become necessary and that further documentation and/or information may be required.

I understand that providing false, incomplete or misleading information or omitting to provide information in this form or related documents may be considered a violation of the *Rules of Racing* and/or may result in the refusal, suspension or revocation of a licence and/or registration. I confirm that the licence / registration holder has granted me the authority to submit this form on their behalf.

Signature of Attending Veterinarian

Date

dd	mm	yyyy

Notification

The information you submit is collected pursuant to the *Horse Racing Licence Act, 2015*. The principal purpose for which this information will be used is to ensure compliance and to determine eligibility, or continued eligibility for a licence and/or registration. Collection, use and disclosure of the information is also subject to the *Freedom of Information and Protection of Privacy Act* (FIPPA). For questions about the collection of this information, please contact Director, Regulatory Compliance at the Alcohol and Gaming Commission of Ontario, 90 Sheppard Avenue East, Suite 200, Toronto, Ontario M2N 0A4 / Telephone: 416-326-8700 or 1-800-522-2876 (toll free in Ontario) / Inquiries: www.agco.ca/iAGCO.